

FILED
UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

JAN 23 2017

JEFFREY P. ALLSTEADT, CLERK
☐ Check if this is an amended filing

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Central District of Illinois

Case number (if known):

Chapter you are filing under:

- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

About Debtor 1:

Donna

First name

Lavette

Middle name

Smith

Last name

Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

Donna

First name

Middle name

Boyd-Smith

Last name

First name

Middle name

Last name

First name

Middle name

Last name

First name

Middle name

Last name

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

XXX - XX - 7 0 8 3

OR

9 XX - XX -

XXX - XX -

OR

9 XX - XX -

Debtor 1 Donna Lavette Smith
First Name Middle Name Last Name

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and *doing business as* names

☒ I have not used any business names or EINs.

Business name _____

Business name _____

EIN _____

EIN _____

☐ I have not used any business names or EINs.

Business name _____

Business name _____

EIN _____

EIN _____

5. Where you live

16546 Winchester Ave.

Number Street

Markham

City

IL

State

60428

ZIP Code

Cook

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City

State

ZIP Code

If Debtor 2 lives at a different address:

Number Street

City

State

ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number Street

P.O. Box

City

State

ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Debtor 1

Donna Lavette Smith
First Name Middle Name Last Name

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☒ Chapter 7

☐ Chapter 11

☐ Chapter 12

☐ Chapter 13

8. How you will pay the fee

☐ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

☒ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

☒ No

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY
District _____ When _____ Case number _____
MM / DD / YYYY
District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

☒ No

☐ Yes. Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY
Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

11. Do you rent your residence?

☒ No. Go to line 12.

☐ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

☐ No. Go to line 12.

☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Donna Lavette Smith
First Name Middle Name Last Name

Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

☒ No. Go to Part 4.

☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))

☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))

☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))

☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

☒ No

☐ Yes. What is the hazard?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street

City

State

ZIP Code

Debtor 1

Donna Lavette Smith
First Name Middle Name Last Name

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

Donna Lavette Smith
First Name Middle Name Last Name

Case number (# known)

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- ☐ No. Go to line 16b.
☒ Yes. Go to line 17.

16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- ☐ No. Go to line 16c.
☐ Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

17. Are you filing under Chapter 7?

☐ No. I am not filing under Chapter 7. Go to line 18.

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

- ☒ No
☐ Yes

18. How many creditors do you estimate that you owe?

- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

19. How much do you estimate your assets to be worth?

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

20. How much do you estimate your liabilities to be?

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input checked="" type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X Donna Smith X

Signature of Debtor 1

Signature of Debtor 2

Executed on 01 18 2017
MM / DD / YYYY

Executed on _____
MM / DD / YYYY

Debtor 1

Donna Lavette Smith
First Name Middle Name Last Name

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X

Signature of Attorney for Debtor

Date

MM / DD / YYYY

Printed name

Firm name

Number Street

City

State

ZIP Code

Contact phone

Email address

Bar number

State

Debtor 1 Donna Lavette Smith
First Name Middle Name Last Name

Case number (if known) _____

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

☐ No
☒ Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

☐ No
☒ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

☒ No
☐ Yes. Name of Person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

x Donna Smith x
Signature of Debtor 1

Date 01/11/2017
MM / DD / YYYY

Contact phone (708) 333-5218

Cell phone (773) 678-1105

Email address donnasmith515@yahoo.com

Signature of Debtor 2 _____

Date _____
MM / DD / YYYY

Contact phone _____

Cell phone _____

Email address _____

Bills for Bankruptcy

Name & Address	Monthly Payment
Capital One Auto Finance 7933 Preston Road Plano, TX 75024 800-946-0332 Acct. # 620617023277	\$439.39 Bal. \$17,615
Capital One Credit Card P.O. Box 70886 Charlotte, NC 28272-9903 800-955-6600 Acct. #	\$60 Bal. \$2,488
American Access Casualty Co. 2211 Butterfield Rd. Ste 200 Downers Grove, IL 60515-1493 708-201-0022	\$62.88
Erie Insurance Sparks Insurance Inc. 6303 75 th St. Kenosha, WI 53142-3513 Acct.# Q021612488 262-697-9600	\$335.43
Time Warner Cable 1320 Dr. Martin Luther King Dr. Milwaukee, WI 53212 Act. # 10404-056916516-5001	\$250.
Get It Now! Store #2387 3446 52 nd St. Kenosha, WI 53144 Acct. #933140838	\$398
Gordmans P.O. Box 659705 San Antonio, TX 78265-9705 Acct. 5856-3732-4708-4119	\$290
Carson's P.O. Box 659813 San Antonio TX 78265-9113 Acct. 2117-1205-1250-8487	\$874
We Energies Harris & Harris Ltd. 111 West Jackson Blvd. Suite 400	\$385

Chicago, IL 60604-4135 Acct.# 29245543	
WOW Internet-Cable-Phone PO Box 4350 Carol Stream, IL 60197-4350 Acct. 014363359	\$307
City of Markham IL Photo Enforcement Program Violation# 1703000410946211 Plate # 449YLL WI	\$100
Aurora Health Care P.O. Box 809418 Chicago, IL 60680-9418 Acct. 1843786	\$1,393
John H. Stroger, Jr. Hospital of Cook County P.O. Box 70121 Chicago, IL 60673-0121 Acct. # 7768065645	\$326
U-Haul Moving & Storage of Markham 16643 Kedzie Ave. Markham, IL 60428 (708) 331-8925 Rm. 2311	\$97.90
Navient P.O. Box 9500 Wilkes-Barre, PA 18773-9500 Acct. 9293605063-1 888-272-5543	Loan 1 \$2,200.00 Loan 2 \$5,400.00
AES American Education Services Payment Center Harrisburg, PA 17130-0001 Acct. # 4626860837 800-233-0557	Unstfd \$714.08 Stffrd \$234.66
ECMC Default Prevention Services P.O. Box 419035 Rancho Cordova, CA 95741-9035 ID/Loan# 908835 01, 02 866-423-7033	\$2,581.12
DHS ILL Department of Human Services Cash Management P.O. Box 19407 Springfield, IL 62794-9407 Acct. 392209	\$5,083
Sleep Solutions, Inc. 825 E. Golf Road Suite 1144	\$456.00

Arlington Heights, IL 60005 Invoice #69549 800-789-9190	
Municipal Collection Service, Inc. P.O. Box 327 Palos Heights, IL 60463-0327 Acct. # 0001263129	\$200
NCO Financial Systems, Inc. Illinois State Toll Hwy Authority 600 Holiday Plaza Drive Ste 300 Matteson, IL 60443 Acct. 19367315 Creditor Notice #VW131487192 888-850-6426	\$214.50
City of Chicago Department of Revenue P.O. Box 88292 Chicago, IL 60680-1292 Notice Number: 5115192900 312-744-7275	\$322.00

Credit Report Copied & Pasted from Website

23
Total
15
Open
8
Closed
5
Negative

Open Accounts

Account Name	Balance	Credit Limit	Usage	Type	Status
CAPITAL ONE AUTO FINAN 6206173023277XXXX	17615	-	-	INSTALLMENT	Current
CAPITAL ONE BANK USA N 51780591XXXX	2488	2300	108%	REVOLVING	Negative
COMENITY BANK/CARSONS 21171200XXXX	874	800	109%	REVOLVING	Negative
COMENITY BANK/GORDMANS 58563732XXXX	290	250	116%	REVOLVING	Negative
DEPT OF EDUCATION/NELN 90000051208XXXX	1813	-	-	INSTALLMENT	Current
DEPT OF EDUCATION/NELN 90000051208XXXX	585	-	-	INSTALLMENT	Current
DEPT OF EDUCATION/NELN 90000048865XXXX	291	-	-	INSTALLMENT	Current
DEPT OF EDUCATION/NELN 90000048028XXXX	3585	-	-	INSTALLMENT	Current
DEPT OF EDUCATION/NELN 90000049010XXXX	1298	-	-	INSTALLMENT	Current
DEPT OF EDUCATION/NELN 90000048028XXXX	3085	-	-	INSTALLMENT	Current
DEPT OF EDUCATION/NELN 90000048739XXXX	1024	-	-	INSTALLMENT	Current
DEPT OF EDUCATION/NELN 90000051208XXXX	1748	-	-	INSTALLMENT	Current

Account Name	Balance	Credit Limit	Usage	Type	Status
GET IT NOW LLC					
93314083893386XXXX	362	-	-	INSTALLMENT	Negative
NAVIENT					
9293605063100022006XXXX	7046	-	-	INSTALLMENT	Current
NAVIENT					
9293605063100012006XXXX	3318	-	-	INSTALLMENT	Current

Closed Accounts

Account Name	Balance	Credit Limit	Usage	Type	Status
AMERICAN HONDA FINANCE					
10912XXXX	-	-	-	INSTALLMENT	Paid
CITIBANK N A					
3396270XXXX	-	-	-	INSTALLMENT	Unknown
CITIBANK N A					
3396270XXXX	-	-	-	INSTALLMENT	Unknown
CREDIT ACCEPTANCE					
262XXXX	-	-	-	INSTALLMENT	Paid
SAF/TRUSTUDENT					
4626860837SF0XXXX	-	-	-	INSTALLMENT	Unknown
SAF/TRUSTUDENT					
4626860837SF0XXXX	-	-	-	INSTALLMENT	Unknown
WISCONSIN ELECTRIC POW					
580861XXXX	-	-	-	OTHER	Negative
WISCONSIN ELECTRIC POW					
925835XXXX	-	-	-	OTHER	Paid

[View Summary](#)

Open Credit Cards	1
Open Retail Cards	2
Open Real Estate Loans	0
Open Installment Loans	12
Total Open Accounts	15
Accounts Ever Late	10
Collections Accounts	4
Time Since Negative	Never
Average Account Age	4 yrs 5 mos
Oldest Account	12 yrs 4 mos

AMERICOLLECT INC

13879XXXX

Original Creditor

Aurora health care

Open Date

Apr 1, 2016

Balance

\$61

Collection Debt

\$61

AMERICOLLECT INC

13828XXXX

Original Creditor

Aurora health care

Open Date

Jul 1, 2016

Balance

\$315

Collection Debt

\$315

STATE COLLECTION SERVI

3992XXXX

Original Creditor

Aurora medical group inc.

Open Date

May 1, 2016

Balance

\$554

Collection Debt

\$554

STATE COLLECTION SERVI

4069XXXX

Original Creditor

Aurora health care

Open Date

Jul 1, 2016

Balance

\$463

Collection Debt

\$463

[View Accounts](#)